

Our Ref: DC/NB

30th October 2019

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To: Prescribing Clinicians and Pharmacists within the Barnsley locality

Dear Colleague

Re: Summary of Key Points from the Area Prescribing Committee Meeting on 9th October 2019

The main outcomes of the meeting were: -

Prescribing Guidelines

The following prescribing guideline was approved by the Committee:

Diagnosing diabetes – which test should be used? [UPDATED]

This guideline has been updated and will be available on the BEST website in due course.

Prescribing guidelines are available on the BEST website at the following link:

<http://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/>

The Barnsley Joint Formulary can be accessed at the following link:

<http://www.barnsleyformulary.nhs.uk/>

Shared Care / Amber-G Guidelines

There were no new or updated shared care or amber-G guidelines approved by the Committee this month.

Shared Care and Amber-G guidelines are available on the BEST website at the following link:

<http://best.barnsleyccg.nhs.uk/clinical-support/medicines/shared-care-guidelines/>.

Prescribers (including secondary care clinicians) are encouraged to report any problems they experience with shared care or other medicines related issues, particularly where guidelines are not being complied with, to the following email address: BarnsleyAPCReport@nhs.net.

The Barnsley Interface Issues Form should be used to report such problems and can be accessed on the Barnsley CCG website at the following link:

<http://www.barnsleyccg.nhs.uk/members-professionals/area-prescribing-committee.htm>

Traffic Light Classifications

The Committee assigned the following classifications to the product included in the table below:

Drug	Formulary Indication	Traffic light status (Drugs with a provisional classification are not currently included on the Barnsley formulary)
Horizon Scanning Document – September 2019		
Glibenclamide 0.6mg/mL & 6mg/mL oral suspension (Amglidia®, AMRING SARL)	Treatment of neonatal diabetes mellitus, for use in newborns, infants and children.	Non-formulary provisional red

MHRA Drug Safety Update

The September 2019 MHRA Drug Safety Update can be accessed at the following link:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/832681/Sept-2019-PDF.pdf

Hormone replacement therapy (HRT): further information on the known increased risk of breast cancer with HRT and its persistence after stopping

New data have confirmed that the risk of breast cancer is increased during use of all types of HRT, except vaginal estrogens, and have also shown that an excess risk of breast cancer persists for longer after stopping HRT than previously thought. Prescribers of HRT should discuss the updated total risk with women using HRT at their next routine appointment.

Advice for healthcare professionals:

- a new meta-analysis of more than 100,000 women with breast cancer has shown that some excess risk of breast cancer with systemic HRT persists for more than 10 years after stopping; the total increased risk of breast cancer is therefore higher than previous estimates (see key findings in the full drug safety update)
- prescribers of HRT should inform women who use or are considering starting HRT of the new information about breast cancer risk at their next routine appointment (see resources provided in the full drug safety update)
- only prescribe HRT to relieve post-menopausal symptoms that are adversely affecting quality of life and regularly review patients using HRT to ensure it is used for the shortest time and at the lowest dose
- remind current and past HRT users to be vigilant for signs of breast cancer and encourage them to attend for breast screening when invited

Montelukast (Singulair®): reminder of the risk of neuropsychiatric reactions

Prescribers should be alert for neuropsychiatric reactions in patients taking montelukast and carefully consider the benefits and risks of continuing treatment if they occur.

Advice for healthcare professionals:

- be alert for neuropsychiatric reactions in patients taking montelukast; events have been reported in adults, adolescents, and children (see list of reported events in the full drug safety update)
- advise patients and their caregivers to read carefully the list of neuropsychiatric reactions in the

patient information leaflet and seek medical advice immediately should they occur

- evaluate carefully the risks and benefits of continuing treatment if neuropsychiatric reactions occur
- be aware of newly recognised neuropsychiatric reactions of speech impairment (stuttering) and obsessive-compulsive symptoms
- report suspected adverse drug reactions associated with montelukast to the [Yellow Card Scheme](#)

Advice to give to patients and caregivers:

- it is important you or your child do not stop montelukast without talking to a doctor or asthma nurse first
- adverse reactions affecting sleep, behaviour, and mood have been infrequently reported in people taking montelukast
- always read the leaflet that accompanies your or your child's medicines, and talk to a healthcare professional if you suspect any serious reactions to montelukast
- patients, parents, and caregivers can report suspected adverse drug reactions to medicines via the [Yellow Card Scheme](#)

Regards



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Lead Pharmacist

cc: Medicines Management Team
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Area Prescribing Committee Members (Secretary to the APC to circulate)
Local Medical Committee (Secretary to the LMC to circulate)
Gary Barnfield, NHS Sheffield CCG
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